

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M	62819	1/20/00
O.I.P.E. CLASSIFIER	—	7	2/1/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	DM	70223	2/23/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	1/19/00
2	1/21/00
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11	1/21/00
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy